

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>CH</i>	<i>67814</i>	<i>9/22/00</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>9-28-00</i>
FORMALITY REVIEW	<i>CH</i>	<i>71432</i>	<i>11/3/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	01/18/00
2			
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7	✓	✓	02/21/00
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9	✓	✓	03/03/00
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19	✓	✓	03/15/00
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23	✓	✓	03/15/00
24	N	N	
25	N	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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